

Jodi Mathews

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IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF OKLAHOMA

(1) FLOYD PATTERSON, JR., as)
a Special Administrator)
of the Estate of FLOYD)
PATTERSON III, deceased,)
Plaintiff,)
-vs-) No. 20-cv-040-RAW
(1) SHERIFF ANDY SIMMONS, in)
his official capacity,)
(2) CITY OF MUSKOGEE,)
OKLAHOMA,)
(3) CHRISTOPHER ROCHELL,)
(4) DOES Nos. 1-10)
Defendants.)

DEPOSITION OF JODI MATHEWS

TAKEN ON BEHALF OF THE DEFENDANTS

IN MUSKOGEE, OKLAHOMA

ON AUGUST 6, 2021

REPORTED BY: KASEY D. EGELSTON, CSR

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1 third year.

2 Q What is your degree?

3 A Human services with a concentration in
4 child and family services.

5 Q When do you hope to graduate?

6 A Hopefully I'll graduate by next year.

7 Q 2022?

8 A Uh-huh.

9 Q Was that a yes?

10 A Yes. Excuse me.

11 Q That's all right. In addition to that, did
12 you attend any other colleges?

13 A No.

14 Q Vo-tech?

15 A I did vo-tech as a -- when I was younger.

16 Q Where did you go for vo-tech?

17 A I went to Muskogee Technology Center.

18 Q What were you studying there?

19 A I did CNA, CMA, phlebotomy, and home health
20 aide.

21 Q CNA, what does that stand for?

22 A Certified nurse's assistant.

23 Q And when were you certified for that?

24 A That's been many years ago, sir. I don't
25 know the exact date. I was probably 18.

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1 Q Is it still current?

2 A No. I changed degrees.

3 Q Do you know how long that lasted? -- the
4 certification?

5 A The certification has to be updated yearly.

6 Q Okay. And then the CMA, what is that?

7 A Certified medication aide.

8 Q And does it have to be recertified --

9 A Yes, sir.

10 Q -- every year?

11 And phlebotomy, I think that's being able
12 to take blood?

13 A Yes, sir.

14 Q Can you also give shots?

15 A Yes, sir. If my certification was up to
16 date.

17 Q Sure.

18 A I changed my degree, so I didn't do anymore
19 of any of that.

20 Q And home health aide, what is that?

21 A Home health aide?

22 Q Yeah.

23 A You go to people's houses and care for them
24 there.

25 Q And did you ever do that?

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1 A Yes, sir.

2 Q Tell me about when that was.

3 A I don't remember the dates. I did that
4 through -- let's see. Advantage Home Health, and
5 they're no longer employed (sic).

6 Q They're no longer around?

7 A I don't believe so.

8 Q What did you call them? Advantage?

9 A Advantage.

10 Q It's just called Advantage?

11 A Advantage Home Health.

12 Q Where were they located out of?

13 A Here in Muskogee.

14 Q How long did you work with them?

15 A I probably stayed with them at least a
16 year.

17 Q So in that job you used your CNA, CMA,
18 phlebotomy, and home health aide --

19 A Not phlebotomy.

20 Q -- certifications?

21 A I didn't use that in that actual job.

22 Q In that job did you use your CNA, CMA and
23 home health aide certifications?

24 A It would have been home health aide
25 certification. The CNA -- no, it wasn't CNA because

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1 A I've taken certificate classes, but not
2 vo-tech.

3 Q Have you ever been in the military?

4 A No, sir.

5 Q Tell me about your past employment history.
6 After you got out of high school, where did you
7 work?

8 A Let's see. After I got out of high school
9 I worked at Pleasant Valley Health Care. I believe
10 that was my first job.

11 Q What did you do for them?

12 A That's where I did the CNA and the CMA.

13 Q What kind of health care did they provide?
14 Is that a nursing home?

15 A It's a nursing home, yes, sir.

16 Q I'm not from Muskogee.

17 A It's okay.

18 Q Was that in Muskogee?

19 A Yes, sir.

20 Q Are they still around?

21 A Yes, sir, they are.

22 Q So in that role you took care of people in
23 the nursing home?

24 A As a CNA, I worked the halls and took care
25 of individuals. As a CMA, I passed medication and

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1 did treatments for wounds.

2 Q How long did you work for Pleasant Valley
3 Health Care?

4 A Let's see. I was at Pleasant Valley -- my
5 oldest daughter was seven months when I went to work
6 there and she was born in 1999, so that would have
7 been probably in 2000 when I started there, and I
8 worked there up until the day I had my son, who was
9 born June 21st of 2001. So that would have been
10 from around the beginning of 2000 until June of
11 2001.

12 Q Okay. Then where else did you work after
13 Pleasant Valley Health Care?

14 A I worked at a place called B&J's Restaurant
15 as a waitress. I don't know the time frames of
16 these items, but I did work there --

17 Q Okay.

18 A -- for a short time. I also worked at
19 Chow's Express.

20 Q As a waitress, cashier?

21 A I was counter work. Oh, and I worked at
22 K-Mart when K-Mart was in Muskogee. I worked there
23 for a little while.

24 Q As a salesperson or a checker?

25 A A checker, uh-huh.

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1 the exact, but I would say at least eight years.

2 Q In your dealings as a CNA or CMA -- I don't
3 remember all of the -- home health care, have you
4 dealt with people who are diabetic?

5 A Yes.

6 Q In your training to get those
7 certifications for CMA, CNA, home health care and
8 maybe not for phlebotomy, but maybe phlebotomy, but
9 were you given training about diabetes?

10 A In those courses, yes.

11 Q Okay. And when you had your phlebotomy
12 license current, if a doctor or someone -- we'll say
13 if a doctor said we need to give him an insulin
14 shot, would you have been qualified to do that?

15 A Yes.

16 Q Were you trained on recognizing people who
17 are suffering from diabetes?

18 A No.

19 Q Were you trained on the signs of people who
20 are diabetic?

21 A Yes.

22 Q Give me some examples of things that would
23 be -- something that would be a symptom of someone
24 who is diabetic or suffering from high sugar?

25 A I'm not real knowledgeable about this, but

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1 policies and procedures?

2 A That would have been that test.

3 Q Okay. And in that test do you remember
4 being trained about diabetes and that it can be
5 mistaken as someone whose intoxicated and to look
6 for a fruity smell? Anything like that?

7 A No. I don't recall that.

8 Q And I recognize that this was a long time
9 ago, but just give me a second and I'll try to
10 refresh your memory. I'm going to mark Defendants'
11 Exhibit 1, which is previously been marked as DDR
12 44, pages 51 through 72. I say that for the record
13 because we may refer to it back and forth, but it's
14 DDR 44, 51 -- so we'll probably just say 51 of
15 Exhibit 1, all the way to 72. Do you see that?

16 (Defendants' Exhibit Number 1 was
17 marked for identification purposes and
18 made a part of the record.)

19 THE WITNESS: Yes.

20 MR. ARTUS: Okay. So this is
21 Defendants' Exhibit 1. I don't have another copy,
22 but it's part of the personnel file that you got.
23 And so on.

24 MR. BLAKEMORE: This thing is -- give
25 me the first Bates stamp, please.

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1 MR. ARTUS: It's 51.

2 Q (By Mr. Artus) Does that refresh your
3 memory about a test you had to take?

4 A Yes. That was a long, long time ago,
5 wasn't it?

6 Q Right.

7 A I made an 85. I passed it.

8 Q Yeah. And it was a requirement that you
9 passed it to continue to work there?

10 A I'm curious to see what I missed.

11 Q But you see on page 65 -- and this is your
12 test; right?

13 A Yep. Yes. This is my test.

14 Q And on page 65, question number 7, do you
15 see that?

16 A Uh-huh.

17 Q Alcoholics and diabetics are often
18 confusingly mistaken. The diabetics often have a
19 sweet smell, and you wrote the word sweet; right?

20 A Yep. They gave us that answer. I remember
21 that.

22 Q Yeah. Right. So you did have some
23 training about diabetes and what to look for in
24 diabetics; right?

25 A Well, I wouldn't call that training, but I

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1 would call that a question -- an answer that was
2 given to us in a test.

3 Q Sure.

4 A I don't anticipate that we'll go around
5 smelling everyone's breath, but yes, I do see that.

6 Q Of course you have some experience with
7 your grandfather?

8 A No, sir.

9 Q Not your grandfather. Your father?

10 A With my father.

11 Q Getting training for CNA or CMA, I can't
12 remember them all, the H -- home health care, at
13 least looking online at what the requirements are
14 that cover those things, one of the things they talk
15 about is diabetes and recognizing diabetes. Do you
16 have any memory of that?

17 A In which class? Or what were you saying?

18 Q Like in getting your CNA and CMA license?

19 A I'm sure at some point that was covered.

20 Q Okay. But anyway, does this refresh your
21 memory that you had to take a test to see if you
22 understood the policies and procedures? You go
23 through the class, explain what your job was and
24 make sure you understand what you're supposed to do;
25 right?

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1 A Yes. We took this test, I believe, every
2 year.

3 Q So working at the jail from 2009 to --

4 A 2018.

5 Q -- 2018, did you work as a runner?

6 A From 2009 to 2018, I was actually -- I
7 started out as a detention officer, I'm assuming.
8 I'm trying to remember exactly, but I soon went to
9 support staff where I did mail. Even before that, I
10 was a secretary. I did payroll. All of these
11 things in combination until Frazier -- Rob Frazier
12 came into office and that's whenever he put me as a
13 supervisor.

14 Q Okay.

15 A So I did a number of things in the jail
16 from 2009 to 2000 and -- probably late '16, early
17 '17. I don't know. You mentioned the date that he
18 came into office, but it was soon after.

19 Q Okay.

20 A Probably within three to four months after
21 he came into office he moved people around and moved
22 me back into the jail as a supervisor.

23 Q Did he do that because you had a lot of
24 experience and he wanted people that had a lot of
25 experience out on the floor?

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1 ready -- or every potential inmate that comes in; is
2 that correct?

3 A Yes.

4 Q And one of the questions is are you
5 diabetic; is that correct?

6 A Yes.

7 Q Is the policy at the jail that if somebody
8 says they're diabetic, they're supposed to get their
9 finger checked for blood sugar levels?

10 MR. BLAKEMORE: Object to the form.

11 Q (By Mr. Artus) You can answer.

12 A I don't know that that is protocol, but if
13 they say they're diabetic, that they automatically
14 stick their finger to check their blood sugar. I do
15 know if they say they're diabetic, then that goes to
16 the medical records, per se.

17 Q So you let medical know that he says he's
18 diabetic?

19 A Yes. And that may be why medical had his
20 file.

21 Q Then medical will come and check them for
22 blood sugar?

23 MR. BLAKEMORE: Object to form.

24 THE WITNESS: No, sir. Medical doesn't
25 automatically come and check them for blood sugar.

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1 Rocky Patterson when you did the shift change?

2 A When we did shift change, usually we look
3 at main control and look at the 27 monitors that are
4 there and we talk about each individual inmate.

5 Regarding Rocky Patterson, at the time, Reynolds
6 stated that he came in at 8:00 that morning.

7 Q Rocky came in at 8:00 that morning?

8 A Yes. Rocky came in at 8:00 that morning
9 and he was intoxicated. He said that he had been
10 cleared through medical and that he needed to sleep
11 it off. And I can elaborate as much as I need to on
12 that.

13 Q Sure, please.

14 A So then I'm looking at the cameras and I
15 see that he doesn't have any clothing on. So I
16 said, okay, guys, can you-all at least help my guys
17 get him dressed before you leave. This is what I
18 told first shift.

19 Q Talking about Robert Reynolds' shift;
20 right?

21 A Yes. Because Mr. -- Rocky had been there
22 11 hours prior -- this is very important to me. 11
23 hours prior to my shift coming on.

24 Q Right. So at 11 hours were you like, hey,
25 he should be sobered up?

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1 Q And then, of course, where are you working
2 at? You're working in booking that day?

3 A I'm working in booking this night because
4 my booking officer was on vacation.

5 Q So you're right there in main control;
6 right?

7 A No. I'm in booking.

8 Q Right. But close to main control?

9 A Close to main control.

10 Q You're also looking at the monitors from
11 time to time; correct?

12 A Correct.

13 Q And you can see on your shift that he's
14 still naked; right?

15 A Well, I do believe that at some point he
16 had covers or something. I don't remember, you
17 know, just staring at the cameras at a naked man,
18 but I would anticipate that he had things back there
19 that should have been on him that may not have been
20 on him and I suppose that Josh Drake covered him as
21 he checked on him, but that, I can't confirm or deny
22 because I wasn't back there.

23 Q Okay. The videos show that he was -- that
24 he was just naked the whole shift. He didn't have a
25 blanket or anything like that.

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1 done, which means that the person who signed off on
2 the cell checks signed off an error.

3 Q Was that something that was a recurring
4 issue at the jail?

5 A I would say yes because it was an ongoing
6 problem. Just because if you've got six people
7 running the whole entire jail and three of those six
8 people are in a tower or at main control where they
9 cannot move from, that leaves you three people.
10 Okay? Cell checks are supposed to be completed by
11 two persons. No one is ever supposed to enter a
12 cell block alone. One of those three people would
13 have been myself, who had to stay in booking, so
14 that leaves you two people to run and care for and
15 cell check for ten cell blocks upstairs and four
16 cell blocks downstairs. I'm not trying to be smart,
17 rude or ugly. I'm just simply telling you the
18 truth.

19 Q No. I understand. That's all I want.

20 A That is exactly -- I mean --

21 Q Now, the six people that were running the
22 jail the night of June 17th, was that kind of --
23 well, let me ask you this first. What was full
24 staffing at the jail?

25 A 10.

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1 Q Okay.

2 A 10 per shift.

3 Q And was it a common issue to have less than
4 10 staffed at the jail?

5 A Unfortunately, yes.

6 Q How often would you be understaffed?

7 A I don't think I would be exaggerating when
8 I said 8 out of 10 times.

9 Q And that 8 out of 10 times, is that -- what
10 time frame are we talking about that you would be
11 understaffed that often?

12 A It would mainly be at night because during
13 the day they had support staff and administration
14 that was there that could fill in those areas where
15 there wasn't anyone.

16 Q And I appreciate that. I probably didn't
17 word that the way I intended. But what I'm asking
18 you is, so there was a time period when you came
19 back in 2009 where you worked as a detention officer
20 again; correct?

21 A Yes.

22 Q And was there -- during that time frame was
23 there an understaffing issue?

24 A Yes.

25 Q Okay. So then you went to a -- I think you

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1 said it's a support staff position?

2 A Yes.

3 Q How long were you -- how long were you in
4 that?

5 A Well, by the calculations I gathered today,
6 it would have been from the time that I started the
7 support staff position, which I don't know that
8 exact date, but it would have been from that day
9 until I was put back in as a supervisor, which would
10 have been three to four months after Mr. Frazier
11 came in as sheriff.

12 Q Which would have been like April of 2017,
13 something like that?

14 A Yes. Because I believe he came in January
15 of 2017, and it was three to four months after that.

16 Q How long -- let me ask it this way, how
17 long did you work as a D.O. after you were rehired
18 in 2009?

19 A I would say a year to two years.

20 Q Okay. So for that year to two years that
21 you were working as a D.O. in 2009 to 2011 maybe,
22 that entire time you were understaffed at the jail 8
23 out of 10 times?

24 A It would be hard to calculate that exact
25 number. I wouldn't say -- oh, you said out of the

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1 entire time I worked there. Man, it was a lot.

2 Q Okay. I'm just asking you to estimate.

3 A Yeah. To estimate, I'm going to say more
4 than half, to be fair.

5 Q And then -- now, going ahead to the time
6 that you're made a supervisor in the spring of 2017,
7 how often from that point to the time that you're
8 terminated in June of 2018, about how often were you
9 understaffed?

10 A At least half or more.

11 Q And what kind of -- what, if any, problems
12 does that create at the jail when you're
13 understaffed like that?

14 A I mean, it creates a domino effect. You
15 can't possibly get cell checks completed being
16 understaffed like that. You can start them and that
17 was a big deal. That was one of the big things.
18 We'll start the cell check so we can get our time
19 written down. Okay? But then we may not come back
20 and finish it. So it's not a completed cell check,
21 however, it's a started cell check, if that makes
22 sense?

23 Q I've gotcha.

24 A Unfortunately, it happened a lot just
25 because we didn't have the people to cover. They're

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1 A Yes.

2 Q When you went back as a jail supervisor,
3 who was it that actually told you you were being
4 appointed to that position?

5 A That would have been Frazier.

6 Q Okay.

7 A Rob Frazier.

8 Q Is that one of the two times that you saw
9 him or?

10 A That might have been three. I didn't see
11 him very often. I didn't see him very often.

12 Q What about the undersheriff, did he ever
13 attend these payroll meetings?

14 A No, sir. I don't recall Terry Freeman
15 participating in these payroll meetings.

16 Q You mentioned at one point, I think, that
17 you had gotten in trouble. I think you said like a
18 thousand times related to medical?

19 A Yes, sir.

20 Q Can you tell me what you meant by that?

21 A What I meant by that was if somebody had a
22 problem, they would say, Jodi, you know, I really
23 need to see the doctor because I've been having pain
24 -- this is an example. I'm giving you an example.
25 I need to see the doctor because I've been having

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1 pain in my side and it's hurting really bad and it's
2 keeping me from sleeping at night and this and that
3 and the other. And I'll say, okay, let me go right
4 now. So I usually carried a notebook with me that I
5 would write different things on as I was walking
6 around doing my checks. Because even though I was a
7 supervisor, I did cell checks and I frequently did
8 cell checks when we had staff available for me to
9 leave my area. And so I would go down and maybe I
10 would, you know, if medical was there, I would ask
11 them about it. Tell them to put in a sick call.
12 Tell them to put in a sick call. So unless they
13 were bleeding or dying visibly, the sick call was
14 the key, if that makes sense?

15 Q And what does that mean? Put in a sick
16 call?

17 A They get a piece of paper that we give them
18 and they write down their name, what cell block
19 they're in, what their problem is about seeing a
20 doctor, about why they need to see the doctor and
21 you turn it into the medical box. Well, when
22 medical decides to get it out of their box and look
23 at it, then they go up to their office. And I know
24 that they're busy too. I'm not trying to say
25 they're not. And they figure out a day or time that

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1 they can see Mr. Mike Smith that comes in on his
2 routines. I think he came in twice a week or
3 something.

4 Q And who was that, for the record?

5 A Mike Smith was the jail doctor.

6 Q Was he actually -- do you know if he was an
7 actual doctor?

8 A I know that he has an office here in
9 Muskogee. I want to say he's a licensed
10 practitioner.

11 Q A nurse practitioner maybe?

12 A Nurse practitioner, yes.

13 Q How often was he there?

14 A I believe he was there twice a week. I
15 believe he was there on Monday and Thursday.

16 Q So there were instances though where you,
17 as a supervisor, and somebody with some medical
18 background, you believe that an inmate needed
19 immediate medical attention, and you would bring
20 that to the nursing staff?

21 A Yes.

22 Q And they would say put in a sick call?

23 A Yes, sir.

24 Q Okay. And you got in trouble for that?

25 A Yes, sir.

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1 Q And how did you get in trouble for that?

2 A During the payroll meetings, Christina
3 Boswell will vouch for this a hundred times as well,
4 we both got in trouble. We worked on the night
5 shift together. She was my booking officer the
6 night this happened and I was taking her spot. They
7 would just tell us you're not medical. You're not
8 medical. You know, you don't need to try to figure
9 out what's wrong with somebody. You're not medical.
10 You just give them a sick call and let them fill it
11 out and we'll get to it.

12 Q I mean, how often would this happen when
13 you would bring an issue to medical and they weren't
14 responsive to it?

15 A Every time I brought an issue to medical it
16 was a problem, but every day I didn't have to bring
17 an issue to medical. I would say probably two or
18 three times a month, per se.

19 Q Okay.

20 A That I would get my butt chewed, you know.

21 Q And every time you went in there and
22 brought them a medical issue, you said it was a
23 problem?

24 A Right. Or there had been a time or two --
25 there had been a time or two -- I keep getting my

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1 time frames mixed up here. We're talking about '17
2 to '19, and I'm kind of going back a little bit
3 further. When I worked on days, I do remember.
4 Depending on who's in medical they might say, well,
5 bring them up real quick or whatever. Or they might
6 call for them to come up there when they can, but
7 towards the end of my employment there it was the
8 sick call was the key. You know, the sick call and
9 we'll get to them. And the doctor only seen an
10 X-amount of inmates per time that he was there.

11 Q Right.

12 A And it took a runner or two, depending on
13 how many, to get these inmates out of the cell
14 blocks and take them up there to see the doctors.

15 Q You also mentioned that some of the time
16 medical wasn't there on your shift; is that right?

17 A Yes, sir. Medical was not rarely there 24
18 hours. Now, it seemed to me like -- and this is
19 just me talking, but it seemed to me like when a
20 situation would happen, they would get back on the
21 ball game and get medical fully staffed where they
22 were there 24 hours. As time went by, they would
23 kind of slack off with that again and medical
24 wouldn't be there 24 hours. Then, you know,
25 something else might happen or maybe they get enough

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1 staff or whatever the reason might be and then
2 medical might be there 24 hours again. I can
3 honestly tell you that medical has not always been
4 at the jail 24 hours.

5 Q I think you said -- I thought you said they
6 were rarely there?

7 A Right.

8 Q Okay.

9 A They were -- well, because either they're
10 staffed there or they're not. What I'm trying to
11 say, I don't know their schedule, but I know that
12 they leave at a certain time. It's not overnight.

13 Q Okay.

14 A Now -- right now they do have medical
15 overnight, as far as I know. Right now they do, but
16 they haven't always, if that makes sense?

17 Q It does.

18 A They have not always had medical overnight.
19 But the reason I know they have medical -- you know
20 what, I say "overnight," but it may not even be
21 overnight. The reason I say this is when I worked
22 CIC, I worked 5:00 p.m. to 1:00 a.m. and sometimes I
23 would go outside at 11:00 or 12:00 at night and
24 there would still be medical outside smoking or in
25 the jail or whatever. So I knew that they still had

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1 medical there, but I don't think medical stayed
2 there overnight. You should be able to confirm
3 whether or not they stayed there overnight.

4 Q I guess what I'm getting at, were there
5 times when you're on a shift and you felt like there
6 was an inmate on your shift that had like an
7 immediate medical need, needing to be assessed, and
8 there was no medical there?

9 A Yes.

10 Q And how often did that happen?

11 A Like I say, I have a big heart for people,
12 so, you know, I might think somebody needs to be
13 assessed that really can wait, you know what I'm
14 saying? But like if somebody is saying they think
15 their blood pressure is high. You know, to me,
16 that's a big deal. Blood pressure can create other
17 problems. I would expect them to get their blood
18 pressure taken within a reasonable amount of time.
19 I think they did actually make it to where we were
20 able to check the blood pressures, but half the time
21 there was not the equipment to check the blood
22 pressures and medical was locked. So unless we
23 brought our own stuff, we wouldn't be able to access
24 those things. I do remember Josh Drake taking blood
25 pressure before. I stayed the majority of the time

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1 downstairs and he did a lot of the stuff upstairs
2 because I was a supervisor and he would sit and he
3 did the running upstairs because that's where the
4 males were, so it was just more convenient for us to
5 do it like that, but.

6 Q I think you also said that -- when we were
7 talking about medical and how it would be a problem
8 and then you said that a situation would happen and
9 it would get better for a short period of time.
10 What did you mean by a situation?

11 A I mean, like if something happened in the
12 jail, like if somebody got really sick, I don't
13 know. I know that there's been other instances
14 that's happened in the jail where people have lost
15 their lives.

16 Q Do you remember any specific incidents
17 while you were there?

18 A Summer -- I can't think of her last name.
19 Summer was one of them because I was in there with
20 her. I actually ran in there with medical and was
21 praying out loud, trying to get her to come back
22 alive and they were doing CPR on her and stuff.

23 Q Do you know when that happened? Summer?

24 A I'm trying to think when that was. I was
25 -- I can look it up.

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1 Q No. I'm just curious.

2 A I don't know off the top of my head.

3 Q A general time frame. Would it have been
4 during this last time that you were at the jail or
5 was it before?

6 A No. It was the last time I was at the
7 jail.

8 Q And do you know what her -- what she died
9 of?

10 A I don't even want to say, but it had
11 something to do with diabetes. But I kind of think
12 it might have. I can get full details from that to
13 back up what I'm talking about.

14 Q Where would you get that full detail?

15 A From the lady that was in medical that day
16 named Julie Robinson. I talk to her on a weekly
17 basis.

18 Q And was she one of the nurses there?

19 A Yes.

20 Q What time period was Ms. Robinson there?

21 A I don't know. My times are so clustered.

22 Q No. I've gotcha.

23 A Let's see. Julie worked there. I want to
24 say Julie had to have worked there between 2015 to
25 '18. No. 2015 to '17.

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1 Q Was she still working at the jail when Mr.
2 Patterson was there?

3 A No.

4 Q Were there any nurses -- were there any
5 nurses on staff during your shift on June 17?

6 A I don't recall any nurses being there. I
7 know Rachel was there during the day. I don't
8 recall that there was a night nurse there. There
9 had to have been someone to pass medications -- the
10 evening medications, but.

11 Q Was med pass ever done by any of the
12 detention officers?

13 A Not on my shift.

14 Q Okay. So who would have typically done the
15 med pass at night?

16 A It would have been somebody in medical.

17 Q Like a CMA, like a certified medicine
18 something?

19 A Yeah. Somebody that worked in medical
20 would have done that. I do recall maybe the
21 deputies passing medications before. I can't
22 elaborate on that enough to have clarity on it, so.

23 Q But you don't recall there being any nurse
24 on staff that night?

25 A No, sir. And that paper where it lists

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1 for instance, having to fill in for booking or one
2 of these other positions, did that make it difficult
3 for you to perform your job as a supervisor?

4 A Yes. Because you have to stay in booking,
5 and I'm a booking officer that particular night, and
6 you have to stay in booking and you're already,
7 according to the sheet, four people short, what does
8 that leave?

9 Q Right.

10 A You know.

11 Q I think that Mr. Artus asked you about when
12 you were in booking, it's close to where the -- I
13 guess the master control is with the video. Could
14 you actually see the video screens from booking
15 where you were that night?

16 A Not from booking.

17 Q Okay.

18 A You would have to go -- booking sat here,
19 per se, and then you would have to have a doorway
20 here and the main control set here and then a little
21 bit up you have all of your monitors. So you
22 couldn't look -- unless you have really good eye
23 vision, you couldn't look from booking to see the
24 board to see what was going on.

25 Q So when you're in booking, do you really

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1 have any ability to monitor what's going on in the
2 rest of the jail through the video system?

3 A Not on a continuous basis. You would have
4 to go into main control.

5 Q Okay.

6 A I mean, you could see what's going on in
7 the intake area because that's in front of you and
8 then you could see what would be going on in detox
9 if you opened up a little steel window. It's about
10 5-by-7 or so, maybe 8-by-10, and you could open it
11 up and look back there. You could stick your head
12 in there if you felt froggy enough. To see inside
13 things, no.

14 Q Okay. Robyn Dunaway or Robyn Kayser that
15 you testified about, you said a couple of times that
16 after this happened with Mr. Patterson, that you had
17 a conversation with her. What did you talk about?
18 What did you tell her?

19 A She said that I guess she knew I was on
20 shift that night whenever he passed away and she
21 said, girl, he was staying -- this is her words.
22 Girl, he was staying with me right before this
23 happened. She told me that they found him in the
24 backyard of his house and that they took him to jail
25 for public intoxication. She said, you know he never

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1 checks -- not at the same time. But, you know, we
2 would holler 114, and we would open it and shut it.
3 So, you know, if there's audio on the camera, you
4 can hear that door open and hear it slamming or you
5 can even see it open and shut. So it did become a
6 big deal in my time being there to where, okay, this
7 is how we have to do cell checks, but it slacked
8 off. It was never consistent.

9 Q From what you testified to, you didn't have
10 the staffing to do it; right?

11 MR. ARTUS: Object to the form.

12 Q (By Mr. Blakemore) Is that right?

13 A That is right. We didn't always have the
14 staff to do proper cell checks.

15 Q Well, most of the time you didn't have the
16 proper staff.

17 MR. ARTUS: Object to form.

18 THE WITNESS: Most of the time.

19 Q (By Mr. Blakemore) That's correct?

20 A Yes.

21 Q You also said during your testimony with
22 Mr. Artus that medical does not automatically check
23 diabetic inmates for blood sugar. What did you mean
24 by that?

25 A I meant that if an inmate comes in and

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1 they're doing this little -- which this doesn't even
2 look like the ones that we do at the intake, but
3 when they do this little intake, you know, do you
4 have this, that and the other, if they were to say
5 yes, that they were a diabetic, medical doesn't grab
6 their cart and say let me check your blood sugar.
7 That's what I meant.

8 Q But would they be put on -- if they say
9 they're diabetic, was it supposed to be that they
10 would have their blood sugar checked regularly?

11 A I don't recall that being a policy.

12 Q Okay. Did -- in the instances where
13 there's no medical staff, like on your shift at
14 night, who would -- for the diabetic inmates, who
15 would do the blood sugar checks? It just didn't
16 happen?

17 A Unless Josh -- I remember Josh Drake doing
18 a few blood sugar checks, but that was because, you
19 know, he would think this person's blood sugar was
20 high or low or what, but we were never given an
21 assignment to check a list of people's blood sugars
22 throughout the night.

23 Q Is it fair to say that -- at least on the
24 night shift, that blood sugars were not regularly
25 checked for diabetic inmates?

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1 A I think it would be fair to say that if
2 medical was not there --

3 Q Yeah.

4 A -- then blood sugars were not checked
5 regularly for diabetic inmates. They may have had a
6 different schedule that they checked these. They
7 may not have been checked at night. I don't know.

8 Q But they weren't being done at night?

9 A No. I tried to stay as far away from
10 medical as I could. Every time I got close to them,
11 I got my head bit off.

12 Q By the way, when you say you got in
13 trouble, you say you got your head bit off, who was
14 it that came down on you?

15 A Ellen snapped at me a few times when I
16 called her for different things. She just -- her
17 shift is over and I'm calling her at home to ask her
18 something. She would low key snap at me, if that
19 makes sense? When we had payroll meetings, it was
20 brought to the attention to everybody, but Christina
21 and I knew who they were referring to because we
22 were really the only people that actually -- I'm not
23 going to say cared about the inmates, but took the
24 extra time to try to see and analyze, hey, there
25 might be really a problem here. This might really

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1 turn into something else.

2 Q And you got in trouble for that?

3 A Yeah. We got reminded. Reminded that we
4 are not medical. You are not medical. If you want
5 to be medical, apply for medical. You are not
6 medical.

7 Q Yeah. So when you had a medical question
8 at night, you would call Ellen Arnold?

9 A If we had a medical issue that we thought,
10 you know, was present, we would have to call Arnold,
11 yes.

12 Q And she -- I think you said that she
13 snapped at you when you called her?

14 A Yes. There was a couple of times that she
15 snapped at me. Not every time. I'm sure if it
16 happened, I'm sure it's in my reports.
17 Unfortunately, I don't have a copy of those, so.

18 Q Did that -- when she snapped at you like
19 that, did that deter you from wanting to call her
20 when you had questions?

21 A It just made me more -- I don't know the
22 word to use, but it just made me more cautious as to
23 when I did call her. And a lot of times I would
24 just make notes and I would leave them, you know,
25 for her whenever she comes on in the morning.

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1 Q Okay.

2 A Not that I'm aware of.

3 Q Yeah. She was a CMA?

4 A I'm not sure.

5 Q Were you aware of that?

6 A No, sir.

7 Q Okay. Do you think -- did Rachel appear to
8 be qualified to make a medical assessment like that?

9 A No, sir.

10 MR. ARTUS: Object to the form.

11 Q (By Mr. Blakemore) Do you know why Rachel
12 was being assigned to medically clear inmates for
13 the jail?

14 MR. ARTUS: Object to the form.

15 THE WITNESS: Can I answer?

16 Q (By Mr. Blakemore) Yeah.

17 A I would imagine because she was hired in
18 that position. Well, she was hired in medical, I
19 guess, to pass medication. But, I guess, because
20 they didn't have anyone titled to do the intakes,
21 maybe that was part of her job description. I don't
22 know who assigned her to that position or that
23 description, but I would assume that would be why.

24 Q I mean, have you been there in booking when
25 there's been medical staff available to medically